

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

Serial No.
10/579,176

Filing Date

Applicant(s)

CLAIMS

| | AS FILED | | AFTER 1 ST AMENDMENT | | AFTER 2 ND AMENDMENT | | | AS FILED | | AFTER 1 ST AMENDMENT | | AFTER 2 ND AMENDMENT | | |
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| TOTAL IND. | 3 | | | | | | | | | | | | | |
| TOTAL DEP. | 37 | | | | | | | | | | | | | |
| TOTAL CLASCS | 40 | | | | | | | | | | | | | |